

# UTILITY PATENT APPLICATION TRANSMITTAL

*r new nonprovisional applications under 37 CFR 1.53(b)*

Attorney Docket No.: 2001\_1139A

First Named Inventor : Koichi HATA et al.

Title: METHOD AND APPARATUS FOR HEADER COMPRESSION

Express Mail Label No.:

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

1. ☒ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)
2. ☐ Small Entity Status is hereby asserted.
3. ☒ Specification [Total Pages: 62]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Sequence Listing, a table, or a computer program listing appendix.
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) [Total Sheets: 11]
5. ☒ Oath or Declaration [Total Pages : 3]
  - a.1. ☒ Newly executed (original or copy)
  - a.2. ☐ Unexecuted
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named  
in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet (see 37 CFR 1.76)
7. ☐ CD-ROM or CD-R in duplicate, large table or computer program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Form
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ Paper
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee)  
☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449  
☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☒ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below, and in a preliminary amendment, or in an Application Data Sheet :

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.

Prior Application Information: Examiner Group Art Unit

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference therein. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS



000513

PATENT TRADEMARK OFFICE

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August 15, 2001

08/15/01

11054 U.S. PTO

11046 U.S. PTO  
09/29/01

08/15/01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Koichi HATA et al.

Serial No. NEW

Filed August 15, 2001

METHOD AND APPARATUS FOR HEADER  
COMPRESSION

THE COMMISSIONER IS AUTHORIZED  
TO CHARGE ANY DEFICIENCY IN THE  
FEES FOR THIS PAPER TO DEPOSIT  
ACCOUNT NO. 23-0975

Attn: APPLICATION BRANCH

Attorney Docket No. 2001\_1139A

PATENT OFFICE FEE TRANSMITTAL FORM

Assistant Commissioner for Patents,  
Washington, DC 20231

Sir:

Attached hereto is a check in the amount of \$1,150.00 to cover Patent Office fees relating to filing the following attached papers:

New application .....	<u>\$710.00</u>
Assignment for Recordal .....	<u>\$ 40.00</u>
Additional Claims Fee:	
Excess of Twenty .....	\$
Independent .....	<u>\$400.00</u>
Multiple Dependent Fee .....	\$

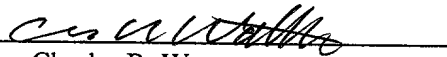
A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

*The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.*

Respectfully submitted,

Koichi HATA et al.

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[Check No. 45984]

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